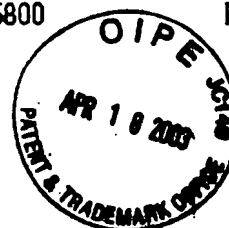


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**
Commissioner for Patents
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23557 7590 01/27/2003
SALIWANCHIK LLOYD & SALIWANCHIK
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GAINESVILLE, FL 326066669

Ph: (352)375-8100 Fax: (352)372-5800

Attn: Frank C. Eisenschenk, Ph.D.

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being furnished transmitted to the USPTO, on the date indicated below.

Gwendolyn L. Daniels (Depositor's name)
 Gwendolyn L. Daniels (Signature)
 April 18, 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09463,680	09/13/2000	Jean-Baptiste Dumas Miles Edwards	44488,019	3172

TITLE OF INVENTION: EXTENDED CDNAS FOR SECRETED PROTEINS

G-03/US03 C37

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	04/28/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
O HARA, EILEEN B	1646	435-068100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.303)

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/122, Rev. 03-01 or more recent) attached. Use of a Crossmark Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Saliwanchik, Lloyd & Saliwanchik

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Genset, S.A.

France

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

4/18/03

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